

Application Preparation & Instructions



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APPLICATION PREPARATION TIPS

Step One – Getting Oriented

READ this *Guidebook and Application* to become familiar with the program

- ◆ Determine if your agency, institution or organization and your proposed project is eligible for this grant program
- ◆ Understand what your responsibilities will be if you are awarded a grant
- ◆ Know what information must be included in your application: refer to the application instructions and sample pages in Section 4 to complete the application form
- ◆ Objectively evaluate your available resources; develop a realistic estimate of the funds, staffing and time needed to undertake and complete the project within the grant cycle time frame

NOTE: The best project proposals are focused, achievable and part of a long-term records management plan

Step Two – Getting Started

- ◆ Use the application pages in this packet as MASTERS, reserve them to make working copies for use during your planning process
- ◆ We recommend you separate the individual tabbed sections of this *Guidebook* and save them in a folder or binder:
 - You will want to refer to specific sections as you develop your proposal
 - The *Guidebook* will be a ready reference source of information to effectively administer an awarded grant

NOTE: The *Guidebook and Application* is revised for each grant cycle; you must use the correct fiscal year edition

- ◆ Allow sufficient time to develop a successful proposal
 - Do not procrastinate
 - Guarantee your local funding as soon as possible
 - Prepare a draft, edit and revise and proofread carefully to achieve the best proposal possible
- ◆ **Research** to determine realistic costs; don't underestimate the level of staffing and time commitment required. Costs can change; everything will take longer than you anticipated; expect delay and problems. One

of the most frequently made comments in final reports was how much time the project required in excess of what was originally estimated.

Contact the Grant Administrator or your regional Field Archivist

- for assistance if you have questions
- need more information about the program in general
- require specific detail about your type of project, or the application form in particular.

Step Three – Putting It All Together

- ◆ FOLLOW the guidelines, instructions and format. A submitted application must be complete:
 - Use the current Application form
 - **Refer to the Instructions and samples in Section 4 as you complete each entry**
 - Respond to all entries within the first six pages of the Application
 - Attach all applicable forms and support materials as required and appropriate to your project
 - Arrange the pages in the correct order
- ◆ Make your responses clear and to the point; your proposal will be judged on content, not weight
- ◆ CHECK AND RECHECK the budget figures and computations. Make sure the numbers on the budget summary sheet reasonably correspond to the narrative budget detail totals and the submitted vendor cost estimates
- ◆ **Have someone other than yourself review the draft** for clarity, typos, spelling errors, etc. If they can't understand the proposal, there's a good chance some of the review board members won't either. **The Grant Administrator can review your draft application mid-November through mid-January to identify inconsistencies or provide suggestions to strengthen the proposal.** NOTE: Applications submitted that have not been draft-reviewed by the Grant Administrator will be forwarded for Board review as submitted.
- ◆ Use blue ink for all signatures
- ◆ PROOFREAD THE FINAL DRAFT BEFORE SUBMITTING IT
- ◆ Use the *Application Checklist* on page 52 to assure the application is complete and the pages are in the correct order

- ◆ Submit the required six (6) copies: your original application plus five (5) photocopies. **Do not staple, permanently secure or place the original in any type of binding or folder**, secure it with a binder clip or paper clip. The duplicate copies may be clipped or stapled.
- ◆ **Applications MUST be received or postmarked by the March 1, 2006 deadline date to advance in the review process**

APPLICATION INSTRUCTIONS

Outline of Application Component Parts

- ✓ Applicant Identification
- ✓ Project Proposal Narrative
- ✓ Budget Summary
- ✓ Budget and Financial Considerations
- ✓ Related Evaluation Factors
- ✓ Support Materials

General Instructions:

- Use the provided application pages and forms as a photocopy MASTERS to produce working copies as you develop your project proposal
- Or complete on-line and print off the linked web-based application pages that will be available by mid-December at www.sos.mo.gov/archives/localrecs/grants/
- If you prefer to produce and submit a word-processed application text rather than the provided pages or the web applications pages for the application narrative, you **MUST** use the same entry headings and pagination sequence as the application form
- **All required pages and sections of the application must be completed and arranged in the correct order.** Refer to the Application Checklist at the end of this chapter. Do not include forms that are not appropriate or applicable to your project.
- All appropriate support materials **MUST** be attached to the application. *NOTE: If you request electronic deposit of grant funds, complete the ACH/EFT form and include it only with the original application; do not copy this completed form or attach it to your application duplicates*
- The original application must be hand-signed by the appropriate authorized official **in blue ink**
- Retain a photocopy of the completed application for your files
- Submit six (6) copies consisting of your original application plus five (5) photocopies. **Do not staple, permanently secure or place the original in any type of binding or folder,** secure it

with a binder clip or paper clip. The duplicate photocopies may be clipped or stapled

- **Local Records must receive applications delivered or postmarked no later than March 1, 2006**

SPECIFIC INSTRUCTIONS:

Applicant Identification

Senate/House Districts – This information is only used for statistical purposes. If you are unsure of the district numbers, please call your local election authority and enter the correct number in the appropriate legislative category.

For all agency or personnel entries, please provide

- Full name and title
- Complete address including both street and post office box when appropriate, plus zip code
- Indicate if the phone and fax listing are the same number
- Provide your e-mail address if you wish to communicate by e-mail

Applicant Agency – This is the local government entity/political subdivision with taxing authority as defined by Missouri Revised Statutes, or a sub-unit thereof. This agency is generally the direct beneficiary of the applied grant funds, for example, the city clerk or county collector.

Federal Employer Identification Number (FEIN) - The FEIN number is necessary to set up your grant payment account. This is a nine-digit number that usually begins 43 or 44.

Electronic Deposit of Grant Funds - If you want to receive payments by direct bank deposit, mark "YES." **If you do not have a previously established and active electronic deposit account, complete the ACH/EFT form in this application.** Electronic Fund Transfer will remain in effect for the payable agency specified on the grant Payment Payee form. Contact the Grand Administrator to determine if an active electronic transfer account exists for the designated payee. If "NO" is marked for electronic fund transfer a paper check payment is processed.

Authorizing Agency – If the applicant agency does not have the independent authority to encumber funds or enter into binding contracts, the agency

possessing that authority should be identified here, for example, City of X, County of Y. The name of the designated Authorizing Official, or other specifically identified individual with the authority to encumber funds or enter into binding contracts should also be provided. This authorized official will also sign the budget summary page, the commitment letter, and if awarded, the grant agreement form.

Primary Project Contact – This is the person who:

- Actively manages the project on a day-by-day basis
- Has daily and hands-on assignments for implementing project activities
- Is personally knowledgeable of current project status

Local Records staff will contact and consult with this designated individual on implementation activities, forms, and reports for the project. Note: Formal project reports may or may not be completed by this person.

Application Preparer – This entry identifies the individual responsible for gathering the application information and completing the forms. Local Records will contact this person if more specific information pertaining to the submitted application is required.

SAMPLE

Missouri Secretary of State
Local Records Preservation Program
FY 2007 Grant Application

James C. Kirkpatrick State Information Center
PO Box 1747, Jefferson City, MO 65102

State Senate District: 10

State House District: 164

Applicant Agency: Pitt County Clerk

County: Pitt

Agency Head Name/Title: Ira Burford Gooden, County Clerk

Address: Pitt County Courthouse, Room 111
37 Courthouse Square
Whiteacres MO 65655

Telephone: 213-546-8790

Fax: 213-546-8794

E-mail: goodib@pittco.net

Federal Employer Identification Number (FEIN): 44-44030020

Would you like your funds electronically deposited? ☐ YES ☒ NO

Authorizing Agency (if different from above): Pitt County Commission

Authorizing Official Name/Title: Isaac Neville Charge, Presiding Commissioner

Address: Pitt County Courthouse, Room 112
37 Courthouse Square
Whiteacres MO 65655

Telephone: 213-546-8791

Fax: 213-546-8794

E-mail: chargin@pittco.net

Primary Project Contact Name/Title: Wright Handy, Deputy Clerk

Address: Pitt County Courthouse, Room 111
37 Courthouse Square
Whiteacres MO 65655

Telephone: 213-546-8790

Fax: 213-546-8794

E-mail: handyw@pittco.net

Application Prepared by (Name/Title): Wright Handy, Pitt County Deputy Clerk

Address:

Pitt County Courthouse, Room 111
37 Courthouse Square
Whiteacres MO 65655

Telephone: 213-546-8790

Fax: 213-546-8794

E-mail: handyw@pittco.net

Date: 2/02/06

Project Proposal Narrative

1. Statement of Purpose - This is a brief statement that clearly identifies your problem and goal.

2. Project Summary - Provides more detail than the statement of purpose.

- It is a brief and general description of how the project will be developed and implemented that
 - describes the current situation and/or identifies specific records by series name and inclusive dates
 - states the anticipated outcome of the successfully completed project

3. Detailed Timeline and Work Plan –

- Beginning with July list by specific months, or weeks of the month, the progressive activities of the project that will be accomplished within each time period: note that Interim Reports are due January 15 and Final Reports are due June 1. Be sure to allow sufficient preparation time at the beginning of your project and sufficient reporting time at the conclusion your project
- **Your project must be completed**, i.e. all activities finished, equipment purchased and in place, all silver master microfilm received for approval by Local Records, **well in advance of submission and approval of your *Final Report* on or before June 1, 2007**. Keep the project manageable knowing that inevitable delays will occur; do not underestimate time and staffing commitment levels.

4. Project Objective/s - Identify the expected result you hope to achieve. These are specific, understandable, and when possible, measurable results, for example:

- 50% of student cumulative records from 1920-1960 will be prepared for future microfilming
- Shelving units and filing cabinets will be installed and in use by March 2007
- Reader/printer will be installed, operational, and appropriate staff trained in its use by January 2007
- 30% of the Recorder of Deeds original records will be microfilmed by February 2007

5. Evaluation of Project Results – HOW will you identify and/or measure the anticipated result/s of your project?

- Will there be an improvement in: space allocation, job efficiency, job functions?
- Are cost savings expected?
- Are you able to serve the public or perform your duties more effectively?

SAMPLE Project Proposal Narrative

1. Statement of Purpose

Pitt County will organize and consolidate all its commission records in a designated record storage area.

2. Project Summary

The county clerk will gather and organize current paper and microfilm materials, plus microfilm Commission Minutes, Resolutions, Ordinances and Indexes from 1890 to 2000, to improve management of and access to commission records.

3. Detailed Timeline and Work Plan

July – Sept.	Purchase supplies; locate, gather and organize records
Sept. – Oct.	Initiate bidding, contracting and purchasing of shelving, microfilming service, and microfilming storage cabinet Submit <i>Microfilm Information sheet</i> to Local Records
Oct. – Dec.	Complete records and target preparation and get check-off approval for filming Install shelving; transfer paper files Install cabinet and store existing microfilm
Dec. – Jan.	Submit Interim Report Begin checking returned microfilm for legibility and completeness
March	Anticipate project completion: all film inspection completed and their corresponding paper records transferred to the Pitt County Historical Society
May-June	Submit Final Report

4. Project Objectives

By May 1, 2007

- Record storage area completed and in use
- All Commission paper records arranged and stored on shelves with retention periods noted
- All Commission Minutes, Resolutions, Ordinances and Indexes from 1890 to 2000 microfilmed and checked to verify completeness of records and their legibility

5. Evaluation of Project Results

We will determinate the average time needed to locate records at the beginning this project and after project completion confirm an anticipated reduction in staff time and labor to manage our records and provide constituent services.

Budget Summary

- This section can only be completed after you have determined the individual component costs of your project and will likely be the last element of the application that is produced.
 - Round off all figures on this form to the nearest dollar: this figure must reasonably correspond the totals provided in the *Budget Detail* section of the narrative and vendor estimate/s provided as support material
 - Totals for lines down and across the page must equal the total project cost for the non-equipment portion of the project with the minimum 30% local match level, and/or the equipment portion with its 50% match level
 - Check your figures and computations to verify the costs were correctly entered and the local match percentages meet grant requirements. For example, projects allocating grants funds at the maximum 70% of the total project cost require a 30% local match. In situations where in-kind contributions are appropriate the local cash match can be as low as 10% of the total project cost with the remaining local match covered as in-kind. All items included in the equipment portion are matched at the 50% level.
- Identify and provide budget category costs and totals
 - These figures must accurately summarize the budget detail totals provided in the application narrative and be based on submitted vendor estimate/s
 - The total cost of new personnel, vendor, consultant services, or purchased commodities, products, equipment each MUST be equal to **grant funds plus local cash match for the item's total cost**

Signature of the Authorizing Official (in blue ink) establishes official approval of the submitted project proposal and budget.

The signatory individual must be the authorized local governmental or political subdivision official with the statutory authority, or another duly designated individual in the agency with the authority, to enter into binding contracts and encumber funds for the applicant agency.

This authorized official will also be the signatory agent for the Grant Agreement form, which establishes a contractual relationship between Secretary of State, Local Records, and the awarded grantee.

NOTE: The Budget Formulation Example is provided only as a working example of how cost allocations can be determined; a formulation page is not submitted as a part of the official application.

SAMPLE BUDGET SUMMARY

Budget Category	Grant Funds (70% maximum)	Cash Match (10% minimum)	In-Kind	TOTAL (100%)
Personnel	<u>400</u>	<u>102</u>	<u>1598</u>	<u>2100</u>
Supplies	<u></u>	<u>90</u>	<u></u>	<u>90</u>
Travel	<u></u>	<u></u>	<u></u>	<u></u>
Vendor	<u>4500</u>	<u>100</u>	<u></u>	<u>4600</u>
Consultant	<u></u>	<u></u>	<u></u>	<u></u>
Other: Specify	<u></u>	<u></u>	<u></u>	<u></u>
	<u></u>	<u></u>	<u></u>	<u></u>
	<u></u>	<u></u>	<u></u>	<u></u>
Shelving (Standard Metal)	<u>693</u>	<u>507</u>	<u></u>	<u>1200</u>
Subtotals	<u>5593</u> (70% maximum)	<u>799</u> (10% minimum)	<u>1598</u>	<u>7990</u> (100%)
[Note: Local Match = 30% of this portion of the project cost]				
<i>Equipment: Specify</i>	<i>50% GRANT funds</i>	<i>50% CASH match</i>		
Microfilm	<u></u>	<u></u>		
Cabinet	<u>175</u>	<u>175</u>		<u>350</u>
	<u></u>	<u></u>		<u></u>
	<u></u>	<u></u>		<u></u>
Subtotals	<u>175</u>	<u>175</u>		<u>350</u>

Grant Funds Requested:

5768

Total Project Cost:

8340

Certification of Authority to Secure and Encumber Project Funds

Isaac Neville Charge, Presiding Commissioner
Printed Name/Title of Authorizing Official

Isaac Neville Charge
Signature of Authorizing Official

Date February 02, 2006

BUDGET FORMULATION EXAMPLE ONLY

Non-equipment project components are funded up to 70% of the total project cost; the remaining 30% of the total project cost must be provided as local match. A minimum 10% can be provided as cash match **IF** appropriate in-kind costs can be claimed.

70% maximum LRP grant funds
30% minimum local match (when appropriate, as a minimum 10% as
_____ cash with the remainder as in-kind)
100% total project cost

EXAMPLE: A microfilming and shelving project is estimated to cost a total of \$8,340

Microfilming component at 70% grant funded level

Personnel estimate =	\$2,100 (140 hours x \$15.00/hr)
Estimated Supply costs =	\$ 90 (for folder, boxes etc.)
Vendor estimate =	\$4,600
Shelving quote =	<u>\$1,200</u>
<i>Microfilming subtotal</i> =	<i>\$7,990</i>
70% grant funds =	\$5,593 (\$7,990 x .7)
10% local cash match =	\$ 799 (\$7,990 x .1) new hire salary
20% local in-kind =	<u>\$1,598</u> (\$7,990 x .2) current staff "
Microfilming subtotal =	\$7,990

Reader/printers, non-standard metal shelving, and other equipment items are funded at the 50% level.

Equipment component

Microfilm Cabinet estimate =	\$350
50% grant funds =	\$175 (\$350 x .5)
50% local match =	<u>\$175</u>
<i>Equipment subtotal</i> =	<i>\$350</i>

Total Cost breakdown and total project cost:

Grant Funds =	\$5,768	(\$5,593 + \$175)
Cash Match =	\$ 974	(\$ 799 + \$175)
In-Kind Match =	<u>\$1,598</u>	
	\$8,340	

NOTE:

- Grant funds plus local cash match **MUST** equal the cost of new personnel salary, vendor services, consultant services, or purchased commodities/products/equipment
- Round your figures off to the nearest dollar to show whole dollar amounts in the Budget Summary
- When all other things are equal applicants with a higher percentage of cash match will be given preference
- Please call the Grant Administrator if you need assistance with your budget

Budget and Financial Considerations

6. Budget Detail, Explanation and Justification –

- Provide a detailed breakdown and cost basis for each component part to be included in the budget category totals that will be entered on the *Budget Summary* sheet
- In some cases a brief statement is necessary to explain or justify why these particular expenditures are appropriate; for example, the reason for selecting a reader/printer/scanner rather than a traditional analog reader/printer
- The total cost for each budget category on this page should be approximately equal to the costs on the *Budget Summary sheet* and on the vendor estimate/s
- **Remember these totals are rounded off to the nearest dollar when transferred to the *Budget Summary* sheet.**

FOR THE LINE ITEM ENTRIES:

Personnel –

- Show staff name, or position if new staff is to be hired, and/or existing staff who will work on the project; designate their hours as grant, local cash, and/or in-kind. See page 4 for a definition of in-kind.
- Show estimated pay rate, work hours, any benefits, total salary for each staff member, and a total for all Personnel costs
- If benefits are included as personnel costs, this should also be shown. Note that grant funds will not cover benefit costs, but this expenditure can be designated as local cash match for new hires, or existing staff working beyond their normal/contracted hours. Salary and benefits for existing staff working on the project during their normal work day are claimed under in-kind match

Supplies – This category is for general office supplies and consumable materials; office equipment/furnishings, construction or renovation supplies and materials should be placed in the *Equipment* budget category at the 50% match level

- List the type, quantity and cost of the desired supplies and materials; provide a per-unit cost, number of units, and total/s.
- Supplies may be covered by grant funds, purchased new with local cash as cash match, or as in-kind match designating the value of on-hand agency supplies that will be used on the project: cost documentation should be provided as an attachment

Travel –

- Indicate the destination and reason for travel
- Show the number of trips, mileage per trip (to a destination and back), and the total cost per trip at the local reimbursable rate, or at the current state rate of 37.5 cents per mile, whichever is lower. Typically grant funds and/or cash match cover travel, only in rare instances will in-kind apply.
- When appropriate to the project, meal and lodging costs are listed and included in this budget category. If these costs are included within a consultant's service estimate, they should be not separated out, but rather included in the *Consultant* budget line

Vendors – Cost estimate should be provided for one silver master and one diazo copy with one page per frame on 35 mm roll film (Note: A silver duplicate is provided instead of a diazo copy for aperture conversion projects). Local Records approval must be requested and received prior to application submission for deviation from this standard

- Provide an estimated cost for microfilming a designated selection of records. Indicate the per image, per 1000-images, or per volume rate, and the total number of estimated images or volumes as the cost basis for your project
- Copies of vendor/s estimate/s should be included as attachment/s to your application
- In-kind contribution cannot be claimed for vendors: Agency personnel costs associated with this budget category should be incorporated within the *Personnel* budget line
 - ✓ ***Records must be older than the current 5 years for filming, unless they are included as part of a longer time frame, or extenuating circumstances, for example a mold problem, are adversely affecting the current***

records. Be sure to include this information in your project narrative.

- ✓ **Fees for records destruction are not eligible project costs. Destruction of original records that have been filmed should not occur without documented authorized official approval and only after film has been verified as legible and complete**
- ✓ **Microfilm storage costs are not eligible project costs**

Consultant/s –

- Indicate the general services the consultant will provide in addition to salary and other related compensation costs
- Copies of the consultant's fee estimate or cost proposal and resume should be included as an attachment to your application

NOTE: Awarded projects must send a copy of the service contract and a copy of any publication/s produced by the consultant to the Grant Administrator as they are available

Other – This category can include

- Grant or local cash match cost for such things as newspaper ads for bids
- In-kind items, such as utilities, space, etc. provided as a local match. These will require an explanation of how such values were determined
- The cost of appropriate, project-related equipment to be purchased solely with local funds and designated as cash match.

NOTE: It is not necessarily advantageous to increase the total project cost with additional budget items or excessive in-kind as the local cash match dollar amount will increase in proportion to the total project cost.

Shelving –

- **ONLY** industrial-type metal shelving costs can be included at the 70% grant funded level. These types of record center shelving units generally consist of:
 - Four round-edge angle-upright posts (13 to 18-gauge) drilled with holes at standard intervals (the lower the gauge number the

stronger/thicker the metal); multiple units should be stabilized side to side and/or back to back

- Depending on the height of the unit/s, sway bracings may be necessary as an additional shelving unit component
 - The shelves (ex. 30" by 42") are attached with stove bolts and nuts and should be spaced on 12-inch vertical centers. The bottom shelf must be at least 3 inches off the floor.
 - If the floor is uneven, shelving units may need to be shimmed to keep the shelves level
 - Shelving of similar construction may also qualify at the 70% grant funding level; please check with the grant administrator or the local field archivist if your needs will not accommodate record center shelving. Provide a rationale for the shelving desired.
 - **Wood or plastic shelving is not funded**
 - ***All other types of shelving such as compact or mobile shelving, open lateral files, etc. is funded at the 50% local cash match level***
 - NOTE: A basic info sheet on record room shelving, storage boxes, and selected appropriate equipment is available upon request from the grant administrator
- List the per-unit cost, the number of units desired, and the total shelving cost. Any vendor shipping and/or installation charges are also included here
- In-kind contribution cannot be claimed for shelving costs: agency personnel costs associated with this budget category are incorporated in the *Personnel* budget line if appropriate

Equipment – All other types of project-appropriate equipment is funded at the 50% local cash match level.

- List equipment here, such as microfilm reader/printers or reader/scanners, hanging-files storage, microform storage cabinets, map cabinets, file cabinets (Note: fire-proof cabinets are not funded), as well as portable air conditioning units and humidity control items. Show the cost per-item, the desired number of items, and the total costs for each of "type" selected equipment
- Equipment maintenance costs are ineligible project costs

- It is best not to provide make and model names/numbers, but do indicate more generic specifications or capacity of a given item. General terms for equipment items, rather than a detailed listing of specific component parts, should be entered on the *Budget Summary* sheet; for example, Reader/Printer

NOTE: Component supplies for secure-storage, basic construction, security, or fire suppression systems are included under *Equipment*.

Note regarding Renovation: Organizations planning to renovate/upgrade their storage space, or planning to create new storage space for permanent records, should consult the resource “**Preservation Concerns in Planning a Records Center**” at www.sos.mo.gov/archives/localrecs/grants

- Renovation supplies and materials are indicated as generic terms on the *Budget Summary* sheet (ex. Electrical fixtures and labor), but the breakdown should be more detailed in this narrative section. Show the per-item charge, number of items and total cost.
- Capital improvements, such as ground-up construction of new additions to existing buildings are ineligible project costs. Please call the grant administrator if your renovation components may be questionable.
- Computer hardware, software and services should be detailed and justified here with per-item and total cost indicated. Again, use generic terms; if reference is made to specific items/products use the phrase “similar to ... [name of a known commercial product]”

7. Funding Source –

- Indicate the source of your local match funds, i.e. tax levy, fees, private donation, etc.
- Justify the need for grant funds, why local funds are not available to fully fund the project

8. Interest –bearing Account –

- Identify the banking institution in which your grant payments will be deposited
- Interest earned must be reported; accommodation will be made in the Final Report to incorporate these funds

9. Accounting Methods and Audit Procedures –

- What agency, department, or staff manages your finances
- Are existing fiscal checks and balances in place with this arrangement
- Who audits your agency and when was your last financial report or audit done

SAMPLE Budget and Financial Considerations

6. Budget Detail, Explanation, and Justification

Personnel – I.B. Gooden estimated 140 hours at	\$ 15	= \$2,100
Approximately 26.5 hours grant funded /	\$ 400	
6.5 hours cash match /	\$ 102	
106.5 hours in-kind	/\$ 1598	
Supplies – Boxes (12x15x10) approximately 30 at 80 cents each		=\$ 24
Folders (Letter size) approximately 10 boxes at \$5.00 each		=\$ 50
Assorted misc. office supplies, ex. Markers,		
heavy duty tape, etc.		=\$ 16
		\$ 90
Vendor Estimate – 54,117 pages at 8.5 cents per page		= \$ 4599.95
Shelving – estimated 8 units at \$150 per unit		= \$ 1200
Microfilm cabinet – 1 base unit with add-on drawer unit/s		<u>=\$ \$350</u>
		\$ 7989.95

7. Funding Source

The county budget is based on tax revenue; local match will be budgeted out of county funds. Due to a declining revenue base the county is unable to meet the full cost of this records management and preservation project.

8. Interest-bearing Account Information

Carnegie Pittman Central Bank

9. Accounting Methods and Audit Procedures

The county treasurer manages all accounts according to standard accounting practices. The county is audited annually with the last audit completed by Bosh, Nosh and Tuttle in 2005.

Related Evaluation Factors

10. Statement of Previous Actions –

- What other records management and/or preservation activities/projects have been completed by your agency
- Were they managed entirely in-house; with the assistance of a Local Records Field Archivist; in conjunction with Local Records' grant/s; funded by other grants (identify), or with other outside sources of funding
- Briefly describe the activity/activities and result/s

11. Impact of this Project and its Importance in Terms of Long-Range Planning

- Describe the broader effect of meeting your objectives
- How will this project fit into your agency's overall management, preservation and access plan

12. Future Records Management and Preservation Projects –

- Are other similar or supportive activities/projects considered by your agency
- How will these future activities/projects be funded

SAMPLE **Related Evaluation Factors**

10. Statement of Previous Actions

Our paper records have not been organized or maintained in the most effective manner and the records are scattered in different office areas and off-site locations.

Minimal microfilming was completed in the 1970's by the county clerk's office. The county paid for the filming services by a vendor that is no longer in business: the records were not produced to Local Records standards.

11. Impact of this Project and its Importance in Terms of Long-Range Planning

The Commission expects this project to initiate an improved records management process that will maintain good records practice and result in improved staff access and constituent service. We consider this the first step in an on-going process to eventually microfilm all permanent county records to ensure critical information is secure.

12. Future Records Management and Preservation Actions

The county will budget funds to continue this process, but will reapply for grant funds for larger projects that cannot be accommodated with strictly local dollars.

SUPPORT MATERIAL ARRANGED IN THIS ORDER

- ***Required Grant Payment Payee*** form
- ***Required*** Letter of funding commitment and local match
- ***Required When Appropriate Records to be Microfilmed*** form/s
- ***Required When Appropriate Reader/Printer or Scanner Request*** form
- ***Required When Appropriate*** Support documentation for services, supplies, equipment, etc. costs
- ***Required When Appropriate*** Floor plan/s
- ***Required*** Resumes of project personnel, consultant, volunteers, etc.
- ***Required When Appropriate*** Applicable additions or other relevant information/materials
- ***Optional Electronic Fund Transfer*** form – Complete only one form which is to be attached to the original application

Support Material

Required Attachments:

- *Grant Payment Payee* form identifies
 - The local government agency to whom the grant payment/s will be made: Provide the agency name, and if appropriate, office, and the address

Note: IF electronic payment transfer is desired, the agency named on the Payment Payee form and the vendor named on the EFT form must be the same.

- To whom a paper check and/or other payment information will be mailed: For the person to receive a check payment and/or other related payment documentation, provide an individual's name/title, agency name, mailing address and telephone number. This may be the designated project contact or another individual.
- *Letter/s of Commitment* should be drafted for signature by the authorizing agency and/or the organization/s that will provide matching funds for the grant project stating that local match will be provided. The percentage level/s of matching funds should be stated rather than straight dollar amounts.
- *Resumes* must be provided for all staff and/or consultants who will be actively working on the project. Briefly describe each person's regular duties as well as their project responsibilities. If new or temporary staff will be hired, submit a job description and provide a brief resume after hire.

Project Specific Required Attachments:

- If they apply to your project complete the necessary *Records to be Microfilmed* and/or *Reader/Printer or Scanner Request* form/s.
 - ❑ Make duplicate clean-form *Records to be Microfilmed* copies as needed (one for each series to be microfilmed)
 - Complete all appropriate sections of the form; call the grant administrator if you have questions (573-751-2798)
 - Filming must be completed at one image per frame unless Local Records has approved otherwise prior to submission of the grant application
 - ❑ Information on the *Reader/Printer or Scanner Request* form can also assist you in selecting appropriate equipment
 - Complete all appropriate sections of the form; call the grant administrator if you have questions (573-751-2798)
- Provide support documentation for costs by attaching copies of brochures, vendor catalog pages, spec sheets, vendor estimates,

consultant info, or other materials that will identify the supplies, services, equipment, etc. desired. If more than one item is printed on the page please indicate the desired commodity/ies.

- Include floor plans if appropriate to your project
 - ❑ **Floor plans are required for shelving or renovation projects.** These plans do not have to be to scale, but should show the storage area dimensions. Show the placement of shelving, equipment, furnishings and any significant architectural features.
- You may add other relevant supplemental information/materials to support your proposal; this is an optional attachment, which may include sample forms, letters of support, photographs, and/or descriptions of items or services that are part of the project and have not been noted or illustrated elsewhere in the application.

Optional Attachment:

IF you do not have an active EFT account with the State, complete the *Electronic Fund Transfer* form to establish this bank direct deposit option instead of receiving a paper check payment. Contact the Grand Administrator to determine if an active electronic transfer account exists for the designated payee. The instructions follow in this section, but the form is with the application pages.

Complete only one form and attach it to the original; do not include copies with the five duplicate application sets

Note: The vendor named on the EFT form must be the same agency named on the Check Payee form.

Use the Application Checklist on page 52 for the correct arrangement of the application pages

SAMPLE GRANT PAYMENT PAYEE FORM

Missouri Secretary of State Local Records Preservation Program **FY 2007 GRANT PAYMENT PAYEE FORM**

This form identifies: 1.) The local government agency/institution/organization to which grant payment will be made. 2.) The individual designated to receive Local Records grant payment documentation, and when appropriate paper check/s if electronic direct deposit is not requested.

Payment Payee Information:

1. List the name and address of the payment payee – do not include an individual's name, only the name and address of the local government agency to which payment must be made.

AGENCY: Pitt County

ADDRESS: 37 Courthouse Square
Address, city, zip

Whiteacres MO 65655

2. Please indicate the individual to whom grant payment documentation should be mailed. This person may be the project contact, or other designated individual representing the applicant or authorizing agency. **A paper check, if requested, and/or other payment information will be mailed directly to this individual.**

NAME/TITLE: Pitt County Treasurer

ADDRESS: 37 Courthouse Square
Address, city, zip)

Whiteacres MO 65655

TELEPHONE: 213-546-8797

RECORDS TO BE MICROFILMED FORM

GENERAL INSTRUCTIONS:

These steps should be completed prior to submitting your application. If awarded, this form establishes the contracted basis of your microfilming project. Any deviation from this record information as awarded will require formal amendment to the contract by the awarded agency to support grant payments for microfilming services

- Check all record storage locations to make sure the range of years is complete for the records you wish to film
- Identify and organize the selected records by office of origin and record series
- Use the appropriate record retention manual to identify and separate record series eligible for filming. (NOTE: You must complete this step to correctly complete the *Records to be Microfilmed* form/s in a grant application.)
- Complete one form for each record series as identified in the appropriate agency retention schedule produced by Local Records. These retention schedules are available online at

www.sos.mo.gov/archives/localrec/schedules/

or by contacting Grant Administrator: 573-751-2798 or
maria.hines@sos.mo.gov

SPECIFIC INSTRUCTIONS:

- *Retention Manual line* – Completion of this entry documents the permanent retention status of the record selected for filming. ***This line must be completed***
- *Office of Origin* – The agency/office that created the record. This may not be the same office in which the records are stored.
- *Record Series Title* – This is the official title of the record series. Consult the appropriate retention manual; if there is any question about the exact title to be used for your records contact the Field Archivist. The generic title used by the manufacturer of bound volumes, or used by a previous office holder, may not correspond to the record series title shown in the retention manual. Record Series title examples from the retention manuals are: *Land Tax Record, Person Property Tax Record, City Council Minutes, Teacher Retirement Records, etc.*

- *Inclusive Dates* – The beginning and end dates for the materials to be filmed
- *Arrangement* – How is the information ordered; chronological (by date), alphabetical, in a designated number sequence. Some records may have more than one type of arrangement, for example, chronological and then alphabetical within each year.
- *Information Content* – This is a description of the kind of information provided within the records. For example: *Deeds* (also called *Titles to Real Estate*) are “real property transactions plus infrequent entries involving personal property. Information [would include] grantor, grantee, location and description of land, monetary consideration, encumbrances (if any), signature of grantor, notary, and witnesses (or facsimiles thereof), date recorded, and plats (where applicable).”
- *Format* – Indicate all entries that appropriately describe the physical nature of the records to be microfilmed. ***Note: Continuous computer paper must be bursed (separated into single sheets) before filming.***
- *Quantity* – Indicate all that appropriately describe the records to be microfilmed; be sure to provide a count number for each entry you mark
- *Sizes* – Indicate the dimensions for a single-sheet page of your records; more than one entry may be marked if appropriate.
- *Pages per 35mm frame* – ***Note: 35mm is the standard for grant-funded filming and should be the basis for your vendor quote; for any deviation from this standard you must request and receive Local Records approval prior to submitting your application.***
- *Additional Information* – Identifies more detailed or specific information considered significant or important about this record series to be microfilmed

SAMPLE Records to be Microfilmed

This form **must** accompany a grant application for microfilming. **Provide one form for each record series.**

11/2005 Municipal Records Manual entry 0037

LIST ABOVE RETENTION MANUAL DATE, TITLE, AND PAGE OR ENTRY NUMBER OF THIS PERMANENT SERIES

Office of Origin: Anytown City Clerk

Records Series Title: Ordinances

Inclusive Dates: 1879-1999

Arrangement: Chronological. Indexed Numerically.

Information Content: Ordinance number, title, statement of provisions, date ordinance was
passed/approved

Format

- ☐ Bound volumes
- ☒ Loose leaf files
- ☐ Continuous computer paper
- ☐ Aperture cards

Quantity

- ☐ Number of volumes: _____
- ☐ Estimate number of pages per volume: _____
- ☒ Estimate number of loose leaf pages: **620**
- ☐ Estimate number of aperture cards: _____ Images per card: _____

Size(s)

- ☐ 5 x 7
- ☒ 8½ x 11
- ☒ 8½ x 14
- ☐ 11 x 17
- ☐ Other: (Describe / Explain) _____

Pages per 35mm frame:

- ☒ 1
- ☐ 2 (Requires Local Records approval)
- ☐ Other: (Describe / Explain) _____

Additional Information: Approximately 80% of the Ordinances date from 1940

READER/PRINTER OR SCANNER FORM INSTRUCTIONS

1. Respond either No or Yes regarding your current microfilm holdings
2. If your office currently has microfilm, indicate the type and quantity owned
3. Indicate the approximate number of times your microfilm products or original records are used. Select only one (1) time frame in which to enter this information.
4. Indicate the general type of equipment desired for purchase
5. Will the reader/printer or reader/scanner require the additional purchase of a workstation. ***If yes, please indicate the reason in the Budget Detail and Justification section of the Application form.***
6. If you currently have microfiche records, indicate if an appropriate attachment needs to also be purchased
7. Include as a support document attachment the vendor's equipment specifications and costs, which may include delivery, installation, and/or training costs. **Note: No maintenance costs can be included in this figure.**

NOTE: At various times, state or federal contract purchase of equipment is available to local governments through the Cooperative Purchasing Program or GSA. When this occurs, you may purchase state contracted items at the pre-negotiated price, or use this price as a base for independent contracting.

7. Vendor Reader/Printer Specifications and Costs, including any costs for delivery, installation and training, must be included as an support attachment. ***Grant project funds or local match cannot be used for the purchase of maintenance contracts.***

At various times, state or federal contract purchase of equipment is available to local governments. Contact the State of Missouri Cooperative Purchasing Program at Phone: 573-751-2387 or E-mail: purchmail@mail.state.mo.us . Federally contracted equipment is available through the GSA; check with your vender for this option.

VENDOR ACH/EFT APPLICATION INSTRUCTIONS

Fill in the appropriate boxes as described below

SECTION A: TO BE COMPLETED BY SUBMITTING VENDOR (INCLUDING STATE EMPLOYEE)

DESCRIPTION

Check the appropriate box for this submission

TAXPAYER ID TYPE

Check 1 if your taxpayer ID is a Federal Employers Identification number (FEIN) or 2 if your taxpayer ID is a Social Security Number (SSN)

TAXPAYER ID NUMBER

Enter the FEIN or SSN associated with the legal name of the entity or individual

VENDOR NUMBER (11 DIGITS)

If known, enter the vendor number assigned to your business or individual by the State of Missouri

VENDOR NAME

Enter the name of the entity or individual: **Individual** - Enter your name (Last Name, First Name and Middle Initial)

Sole Proprietor - Enter name of Business **Corporation** - Enter your Doing Business As (DBA) name **Other** - Enter your entity's name

LEGAL ENTITY NAME

Enter Legal Name of Entity or Individual as filed with IRS: **Individual** - Enter your name (Last Name, First Name and Middle Initial)

Sole Proprietor - Enter owner's name (Last Name, First Name and Middle Initial) **Corporation** - Enter your name as it appears on the charter or other legal document creating it and as filed with the IRS **Other** - Enter your entity's name as filed with the IRS

ADDRESS

Enter your mailing address

TELEPHONE NUMBER

Enter your telephone number with area code

CITY, STATE, ZIP CODE

Enter your city, state and zip code for the street address

SECTION B: TO BE COMPLETED BY STATE EMPLOYEE ONLY

HOME ADDRESS

Enter your home address

HOME PHONE NUMBER

Enter your home phone number

CITY, STATE, ZIP CODE

Enter your city, state and zip code for the address

SECTION C: TO BE COMPLETED BY SUBMITTING VENDOR

FINANCIAL INSTITUTION NAME, ADDRESS, CITY, STATE, ZIP CODE, PHONE NUMBER

Enter in this information provided to you by your bank

NOTE: If this is a request for a "CHANGE" please provide your previous financial institution name in the space provided

DEPOSITOR ROUTING NUMBER

Enter your financial institution's routing number

NOTE: If this is a request for a "CHANGE" please provide your previous routing number in the space provided

DEPOSITOR ACCOUNT NUMBER

Enter your account number

NOTE: If this is a request for a "CHANGE" please provide your previous account number in the space provided

DEPOSITOR ACCOUNT TYPE

Please select type of account (savings or checking)

SECTION D: FINANCIAL INSTITUTION CERTIFICATION

FINANCIAL INSTITUTION CERTIFICATION

Application must be signed by a representative of your bank after bank verification

NOTE: If this section of the application is not completed the application will be returned and not processed

SECTION E: VENDOR AUTHORIZATION

VENDOR AUTHORIZATION

Must be signed by an authorized representative or state employee before application can be processed by the Office of Administration, Division of Accounting

MAILING INSTRUCTIONS

Fax completed application to the Office of Administration at 573-526-9813. If you do not have access to a fax machine, mail the completed application to the Office of Administration, Division of Accounting, Truman State Office Building, PO Box 809, Jefferson City, MO 65102. The application may also be mailed to Agency you are doing business with at this time for processing

GENERAL INSTRUCTIONS

If the applicable sections of this application are not complete, the application will not be processed by the Office of Administration, Division of Accounting
ACH transactions will be effective approximately one month after the application is approved by the Office of Administration, Division of Accounting

Changing Financial Institution or Depositor Account (within the same Financial Institution)-All deposits will continue to be deposited into your present account until the Office of Administration, Division of Accounting has been notified that you have changed your banking information. At which time you will need to submit a new Vendor ACH/EFT Application making sure to check the appropriate "CHANGE" box at the top of the form, and completing the applicable fields on this form

NOTE: Failure to obtain the Financial Institution Certification may result in delayed payments to vendor. Do not close an old account until the first transaction has been deposited into your new account.

FY 2007 Applicant Checklist

Use this checklist to review your application before submitting it. Additional information may be requested for applications during the pre-review period; do not leave items incomplete, or missing. Be sure you have followed the specific instructions provided in Section 3 to complete all entries and the application pages are arranged in this order.

APPLICANT IDENTIFICATION

- ☐ Senate/Representative Districts Provided
- ☐ Applicant, Government Entity and Project Contact Identified
- ☐ Federal Employer Identification Number (FEIN) Provided
- ☐ "YES" or "NO" Decision Checked for Electronic Fund Transfer
- ☐ Application Preparer Identified

PROJECT PROPOSAL NARRATIVE includes

- ☐ Statement of Purpose
- ☐ Project Summary
- ☐ Timeline and Detailed Work Plan
- ☐ Project Objectives
- ☐ Evaluation of Project Results

BUDGET SUMMARY

- ☐ Summary Sheet Completed with Correct "Budget Detail" Page Totals
- ☐ Authorized Official's Signature Is Affixed

BUDGET AND FINANCIAL CONSIDERATIONS

- ☐ Budget Detail, Explanation and Justification Provided
- ☐ Funding Source Indicated
- ☐ Interest-bearing Account Information Provided
- ☐ Accounting Methods and Audit Procedures Addressed

RELATED EVALUATION FACTORS

- ☐ Statement of Previous [records management/preservation] Actions Provided
- ☐ Project Impact and Importance of Project in Terms of Long Range Planning Stated
- ☐ Future Records Management and Preservation Projects Indicated

SUPPORT MATERIAL

- *Grant Payment Payee form*
 - *Letter of Commitment* with percentage match level/s indicated
 - *Records to be Microfilmed* form/s
 - *Reader/Printer Request* form
 - Identification of services, supplies, vendor quotes, etc. with cost documentation
 - Floor plan/s
 - Resumes of project personnel, consultant, volunteers, etc.
 - Appropriate Additions (letters of support, sample forms, and photographs, etc.) and other relevant information, if applicable
 - ACH/EFT form for electronic bank deposit of grant payment/s in original application only
- ✓ ***Send paper or binder- clipped original, plus 5 photocopied applications (clipped or stapled)***
 - ✓ ***Delivery or postmark is ensured for March 1, 2006***